

### Strategies to Support Implementation of the 2004 State Oral Health Plan

Goal and Objectives	How OHAC can support	Who in OHAC	How CUSP can support	Who in CUSP	How CCOH can support	Who in CCOH
<b>Goal 1: To maintain and expand an Oral Health System in Nevada.</b>						
1.1. Maintain a State Oral Health Program.	1.1. Nothing identified.	1.1.-----	1.1. Nothing identified.	-----	1.1. Support funding to hire a dentist as the full time State Dental Health Officer.	1.1. CCOH Legislative Committee
1.2. Maintain an Oral Health Advisory Committee.	1.2. Nothing identified	1.2.----- -	1.2.Nothing identified	-----	1.2. Nothing identified	-----
1.3. Identify resources and capacity, determine needs, and develop a community based reporting system.	1.3. Nothing identified.	1.3.-----	1.3. Nothing identified.	-----	1.3. Nothing identified.	-----
1.4. Develop an ongoing surveillance system.	1.4. Establish a subcommittee to assist the State Oral Health Program in	1.4. The Chair shall appoint the members of the subcommittee.	1.4. Nothing identified.	-----	1.4. Nothing identified	-----

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	determining oral health status and needs of individuals with disabilities.					
<p><b>Goal 2: To change the culture of accepted norms.</b></p> <p>2.1. Utilize targeted, community-based social norms marketing regarding oral health throughout the lifespan.</p> <p>2.2. Link medical and dental health.</p>	<p>2.1. Nothing identified.</p> <p>2.2. Continue to pursue the integration of oral health education in medical and dental school by contacting and working with the</p>	<p>2.1 - - - - -</p> <p>2.2. State Dental Health Consultant, UNLV School of Dental Medicine.</p>	<p>2.1. Partner with WIC marketing, the Access to Health Care Washoe County Network, and the Washoe County Tobacco Coalition to integrate oral health in WIC messages, messages produced with HCAP grant funding and Tobacco Coalition messages.</p> <p>2.2. Partner with the Orvis School of Nursing, Health Access Washoe County, and High Sierra AHEC to link medical and dental health. This can be done by providing oral health education to</p>	<p>2.1. Washoe County District Health Department, Saint Mary's, HAWC, High Sierra AHEC, State Oral Health Program, Coalition Coordinator.</p> <p>2.2. HAWC, High Sierra AHEC, State Oral Health Program, Coalition Coordinator.</p>	<p>2.1. Utilize brochures available from the OH program at health fairs, clinics etc.</p> <p>2.2.a. Develop a White Paper on the relationship between oral health and general health.</p> <p>2.2.b. Offer to teach a class to</p>	<p>2.1. All CCOH members.</p> <p>2.2.a. Oral Health Program.</p> <p>2.2.b. UNLV SDM.</p>

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2.3. Provide oral health education and care in schools and other appropriate venues.	Area Health Education Centers (AHECs) and the GPR program.  2.3. Nothing identified.	2.3. -----	nursing students, medical providers at HAWC, and through the AHEC preceptor program. In addition, investigate ways to link medical and dental health through partnership with the Access to Health Care Washoe County Network, of which CUSP is a member.  2.3. Develop a White Paper on School Oral Health. Include information on the burden of oral disease in school age children and adolescents, information about oral hygiene, nutrition, sealant, fluoridation, fluoride varnish and other forms of fluoride appropriate for use with school age	2.3. State Oral Health Program, Coalition Coordinator, Children’s Cabinet.	medical students.  2.2.c. Contact the Pediatric Residents program and offer to present at their monthly luncheon meeting.  2.2.d. Contact the Pediatric Medical Association and offer to present at a monthly meeting.  2.3. Support use of a standardized curriculum and a single point of contact in the CCSD by all CCOH members who make educational presentations in Clark County Schools.	2.2.c. UNLV SDM  2.2.d. UNLV SDM.  2.3. All CCOH members.

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2.4. Educate public officials and community leaders utilizing the <i>National Call to Action</i> .	2.4. Nothing identified.	2.4. -----	<p>children and adolescents. Include recommendation related to school nutrition, oral health screening or examination prior to school enrollment, school-based dental sealant programs etc. Incorporate oral health education in other organizations such as the Children’s Cabinet in newsletters and websites</p> <p>2.4. Have CUSP members provide information to public officials and community leaders through use of White Papers and County and State Oral Health Fact Sheets.</p>	2.4. All CUSP members.	2.4. Seek opportunities to inform public officials about the State Oral Health Plan.	2.4. All CCOH members.
2.5. Assist communities in using the <i>National Call to Action</i> to develop local	2.5. Nothing identified.	2.5. -----	2.5. Nothing identified.	2.5. -----	2.5.a. Promote participation in the 2005 State Oral Health Summit.	2.5.a. CCOH Executive Board.

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<p>plans.</p> <p>2.6. Make it easy to seek care and information.</p>	<p>2.6 Nothing identified.</p>	<p>2.6. -----</p>	<p>2.6. Nothing identified.</p>	<p>2.6. -----</p>	<p>2.5.b. Provide technical support and advice to counties and regions as they implement their regional oral health plans.</p> <p>2.6. Provide oral health resource information to referral agencies such as United Way.</p>	<p>2.5.b. All CCOH members.</p> <p>2.6. CCOH Executive Board.</p>
<p><b>Goal 3: To develop policy to promote oral health.</b></p> <p>3.1. Develop and disseminate concise and relevant messages for policymakers and administrators at local, state, and</p>	<p>3.1. Nothing identified.</p>	<p>3.1. -----</p>	<p>3.1. Coalition members who are part of the Great Basin Primary Care Association can participate in the GBPCA Day at the legislature. They can</p>	<p>3.1. All CUSP members</p>	<p>3. Appoint a CCOH legislative committee to develop a CCOH legislative platform</p> <p>3.1. Promote use of White Papers and State and County fact sheets by CCOH members.</p>	<p>3. CCOH Chair.</p> <p>3.1. CCOH Executive Board.</p>

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federal levels related to the results of oral health research and the oral health status of their constituents.			utilize White Papers and Fact Sheets when meeting with legislators. White Papers and Fact Sheets can be used by all Coalition members when they meet with policymakers and administrators			
3.2. Expand Medicaid coverage to include basic oral health services for adults, especially seniors.	3.2. Nothing identified.	3.2. -----	3.2. Partner with the Community Coalition for Oral Health to issue an invitation for Assemblywoman Kathy McClain to speak about her 2005 Session Bill Draft Request (BDR) to provide oral health services for qualified seniors.	3.2. CUSP Chair	3.2. Identify a legislator to introduce legislation to expand oral health services covered by Medicaid for adults or seniors and pregnant women.	3.3. CCOH Legislative Committee.
3.3. Pursue policy changes to improve provider participation in public health insurance programs and enhance patient access to	3.3. Write a letter to the Administrator of the DHCFP requesting the reestablishment and expansion of the dental	3.3. Chair of the OHAC.	3.3. Support the State Oral Health Advisory Committee in their efforts to reestablish a Dental Advisory Subcommittee to the Medicaid Advisory Committee. If needed,	3.3. CUSP Chair	3.3. Include CCOH members on the dental subcommittee of the Medicaid Medical Care Advisory Committee	3.3. CCOH Chair.

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<p>care (provider recruitment and training, electronic billing, presumptive eligibility.)</p> <p>3.4. Seek legislative policies to provide dental service coverage, especially for at-risk populations.</p>	<p>subcommittee to the Medical Care Advisory Committee (MCAC).</p> <p>3.4. Nothing identified.</p>	<p>3.4. N/A</p>	<p>send letters to the Division of Health Care Financing and Policy requesting the process of establishing the subcommittee is expedited. Request that CUSP members participate on the Medicaid Oral Health Subcommittee.</p> <p>3.4. Request billing information from hospitals for admissions or emergency room visits related to oral disease. Analyze data to estimate the cost of treating oral disease in hospital settings. Develop a White Paper or Fact Sheets to demonstrate the cost savings of providing preventive and restorative care vs. the cost of treating dental emergencies in hospital settings. Disseminate this information to</p>	<p>3.4. Request and analyze data. Write Paper - Staff of State Oral Health Program. Disseminate information - all CUSP members</p>	<p>(MCAC). Emphasize the need to have a policy maker at Medicaid and a “rank-and-file” staff person attend subcommittee meetings.</p> <p>3.4. Coordinate an oral health screening to collect data on a representative sample of individuals with disabilities in Clark County.</p>	<p>3.4. Coalition Coordinator, UNLV SDM, CCSN Dental Hygiene program, Pediatric Dental Residency program, GPR program, NDA, SNDS, NDHA, SNDHA.</p>

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<p>3.5. Increase oral health care access and improve oral health outcomes by amending Nevada Revised Statute (NRS) and Nevada Administrative Code (NAC) related to licensure and scope of practice.</p>	<p>3.5. Nothing identified.</p>	<p>3.5. N/A</p>	<p>policymakers, administrators, etc.</p> <p>3.5. Establish a CUSP subcommittee to determine what data needs to be collected to evaluate dental workforce capacity. For example, the number of practicing dentists, where they practice, how many days a week do they practice, do they see Medicaid and Nevada Check-Up clients, when do they plan to retire, do they employ a dental hygienist, how many days a week do they employ a dental hygienist etc. Work with the State to collect and analyze the data. Disseminate the information to policy makers and stakeholders.</p>	<p>3.5. Subcommittee to determine data needs - Mark Rosenberg, High Sierra AHEC, State Oral Health Program, Primary Care Development Center, Nevada Dental Association. Collect and analyze data – State Oral Health Program, Primary Care Development Center. Disseminate information – All CUSP members.</p>	<p>3.5.a. Support development of a definition of underserved that is acceptable to the Primary Care Development Center, the Office of Rural Health and the Nevada Dental Association.</p> <p>3.5.b. Write an article for the NDA Journal that clearly describes how Medicaid fee for services and managed care work in Clark County</p>	<p>3.5.a. CCOH Chair.</p> <p>3.5.b. CCOH Chair.</p>
<p>3.6. Allow a portion of the</p>	<p>3.6. Write a letter to the Nevada</p>	<p>3.6. Chair of the OHAC.</p>	<p>3.6. Determine the status of the letter from</p>	<p>3.6. Determine status of OHAC</p>	<p>3.6.a. Determine status of OHAC</p>	<p>3.6. CCOH Secretary.</p>

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<p>continuing education requirement for licensure to be completed by providing oral health services on a volunteer basis.</p>	<p>State Board of Dental Examiners requesting they consider allowing a portion of dentist's and dental hygienist's continuing education to be satisfied by providing oral health services on a volunteer basis.</p>		<p>the State Oral Health Advisory Committee to the State Board of Dental Examiners requesting that the Board allow a portion of the continuing education requirement for licensure to be completed by providing oral health services on a volunteer basis. Send a similar letter from CUSP requesting this issue be placed on the agenda of the State Board of Dental Examiners. Testify in support of the policy change once it is placed on the Board's agenda.</p>	<p>letter and write CUSP letter – Chair. Testify – All CUSP members.</p>	<p>request to the State Board of Dental Examiners.</p> <p>3.6.b. Testify in support of the change when it is placed on the agenda of the State Board of Dental Examiners.</p>	<p>3.6.b. All CCOH members.</p>
<p>3.7. Expand the oral health workforce capacity and productivity in Dental Health Professional Shortage Areas (HPSA) by creating new and</p>	<p>3.7. Establish a subcommittee to develop an array of realistic options.</p>	<p>3.7. Established by the Chair of the OHAC.</p>	<p>3.7. Nothing identified.</p>	<p>3.7. -----</p>	<p>3.7.a. Investigate the solutions suggested by the American Dental Association (ADA) to see what might work in Nevada. Create a White</p>	<p>3.7. NDA, Oral Health Program.</p>

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<p>expanding existing incentives.</p> <p>3.8. Implement legislation to prohibit the sale of soda pop in K-12 schools, require oral health screening prior to school enrollment, require oral health education in school curricula and promote consumption of fluoridated water in schools.</p>	<p>3.8.a. Identify a legislator to introduce legislation to prohibit the sale of soda pop in K-12 schools.</p> <p>3.8.b. Identify a legislator to introduce legislation to require oral health screening prior to school enrollment.</p>	<p>3.8.a. All OHAC members.</p> <p>3.8.b. All OHAC members.</p>	<p>3.8. Nothing identified.</p>	<p>3.8. -----</p>	<p>paper based on the ADA recommendations Distribute the White Paper to counties/regions along with a survey asking them what if any of the recommendations they would be willing to implement.</p> <p>3.8. Contact the Nutrition Committee in the Department of Education to find out what, if any, state policies and or regulations exist related to school nutrition. Based on that information, determine if CCOH needs to identify a legislator willing to introduce</p>	<p>3.8. CCOH Secretary. CCOH Legislative Committee.</p>

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<p>3.9. Dedicate a portion of “sin taxes” for oral health programs.</p>	<p>3.8.c. Identify a legislator to introduce legislation to require oral health education in school curricula.</p> <p>3.8.d. Identify a legislator to introduce legislation to promote the consumption of fluoridated water in schools.</p> <p>3.9. Nothing identified.</p>	<p>3.8.c. All OHAC members.</p> <p>3.8.d. All OHAC members.</p> <p>3.9. -----</p>	<p>3.9. Nothing identified</p>	<p>3.9. -----</p>	<p>legislation.</p> <p>3.9. Nothing identified.</p>	<p>3.9. -----</p>
<p><b>Goal 4. Develop sustainability of the State Oral Health Program.</b></p> <p>4.1. Build and nurture broad-based coalitions that incorporate the</p>	<p>4.1. Nothing identified.</p>	<p>4.1. -----</p>	<p>4.1 Recruit Latino, senior, developmentally disabled advocates and</p>	<p>4.1. Latino – Mike Johnon will contact the Commission on Minority affairs,</p>	<p>4.1. Increase the diversity and membership of CCOH by</p>	<p>4.1. Hospitals- Dr. Sanders, Dr. Cooley. Advocacy</p>

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<p>views and expertise of all stakeholders and tailored to specific populations, conditions, or programs.</p> <p>4.2. Engage stakeholders and coalitions to advocate for the goals of the Oral Health Program.</p>	<p>4.2. Look for opportunities to recognize the Oral Health Program (media, awards etc.)</p>	<p>4.2. All OHAC members.</p>	<p>someone from the medical community.</p> <p>4.2.a. Contact the State Public Information Officer for advice.</p> <p>4.2.b. Send copies of the white papers to Jason Hidalgo at the Reno Gazette Journal.</p> <p>4.2.c. Distribute white papers and county fact sheets at the Access to Health Care Washoe County Community Forum on January 28, 2005.</p> <p>4.2.d. Contact GBPCA to see if they would</p>	<p>Senior advocate – Mike Rodolico will contact Dr. Lloyd Diedrichsen, Chris Forsch will contact the Nevada Academy of Pediatrics and the Nevada Association of OBGYNs.</p> <p>4.2.a. State Oral Health Program</p> <p>4.2.b. Coalition Chair</p> <p>4.2.c. Coalition Chair</p> <p>4.2.d. Coalition Chair</p>	<p>inviting organizations such as Hispanic, African American, senior and developmentally disabled advocacy groups, hospitals, insurers etc. to join CCOH.</p> <p>4.2. Nothing identified</p>	<p>groups – Coalition Coordinator. Others – all CCOH members.</p> <p>4.2. - - - - -</p>

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<p>4.3. Engage stakeholders and coalitions to advocate for funding for the Oral Health Program.</p>	<p>4.3.a. Identify a legislator who is willing to introduce legislation to allocate State General Funds for the State Oral Health Program.</p> <p>4.3.b. Write a letter supporting the Maternal and Child Health Needs Assessment recommendation to use State</p>	<p>4.3.a. All OHAC members.</p> <p>4.3.b. OHAC Chair</p>	<p>like copies of the white papers and county fact sheets to use at Safety Net Provider Day.</p> <p>4.2.e. Do a direct mailing of the white papers and county fact sheets to relevant entities (school superintendents, county commissioners, Sanford Center for Aging etc.)</p> <p>4.3. Write a letter supporting the Maternal and Child Health Needs Assessment recommendation to use State General Funds to support the State Oral Health Program.</p>	<p>4.2.e. Coalition Chair</p> <p>4.3. Coalition Chair</p>	<p>4.3. Collect data on the value of services provided by members of CCOH. Compile data into a report and disseminate to stakeholders.</p>	<p>4.3. Coalition Coordinator</p>

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	General Funds to support the State Oral Health Program.					
<p><b>Goal 5. Promote effective disease prevention strategies and programs.</b></p> <p>5.1.Promote expansion of existing and establishment of new school-based sealant programs.</p>	5.1. Nothing identified.	5.1. -----	5.1. Make sealant white paper and brochures available for dissemination by the Take Care-A-Van and Seal Nevada.	5.1. State Oral Health Program.	5.1. Utilize the Sealant White Paper to educate policy makers about the benefits of supporting school-based dental sealant programs. Disseminate the results of the cost benefit analysis of school-based dental sealant programs being conducted by Saint Mary’s and the State Oral Health Program.	5.1. All CCOH members.

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<p>5.2. Promote use of sealants by safety-net providers and private practitioners.</p>	<p>5.2. The Chair of the OHAC shall direct the State Dental Health Consultant to write an article for the Journal of the Nevada Dental Association discussing the benefits of dental sealants both in private practice and public health settings.</p>	<p>5.2. OHAC Chair and State Dental Health Consultant.</p>	<p>5.2.a. Investigate the possibility of getting portable sealant equipment donated to the TMCC dental hygiene program.</p> <p>5.2.b. Provide the sealant white paper and brochures to NNDHP. Have their Board review them to see if they think distributing them to NNDHP providers would help stimulate interest in placing sealants.</p> <p>5.2.c. Investigate the possibility of folding prophylaxis/sealant days in Reno similar to the ones held in Las Vegas.</p>	<p>5.2.a. Sealant Coordinator and Coalition Coordinator</p> <p>5.2.b. Oral Health Program.</p> <p>5.2.c. Coalition Coordinator.</p>	<p>5.2. Utilize the recent American Dental Association, Council on Scientific Affairs and Council on Access Prevention and Interprofessional Relations (CAPIR) report on dental sealants to educate providers about the benefits of dental sealants (i.e. article in NDA Journal, presentation at Society meetings). Encourage application of dental sealants in dental public health clinics.</p>	<p>5.2. State Dental Health Consultant.</p>
<p>5.3. Promote an increase in the percent of</p>	<p>5.3. The Chair shall establish a subcommittee to</p>	<p>5.3. OHAC Chair. OHAC Subcommittee.</p>	<p>5.3.a. Identify the point of contact for groups that could be rallied to</p>	<p>5.3.a. All CUSP members send info to Oral Health</p>	<p>5.3. Disseminate information about regional</p>	<p>5.3. All CCOH members.</p>

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<p>Nevadans with access to optimally fluoridated community water systems.</p> <p>5.4. Promote the establishment of community-based fluoride varnish programs for at-risk populations.</p>	<p>include the State Dental Health Consultant, the OHAC member representing Miles for Smiles and others. The subcommittee shall identify speakers to testify in support of community based water fluoridation. The subcommittee will coordinate the speaker's presentations and notify speakers when they are needed to testify.</p> <p>5.4.a. Contact the UNLV and the CCSN nursing schools to provide education and training on oral health screening, anticipatory guidance, and</p>	<p>5.4. State Dental Health Consultant, OHAC members from CCSN Dental Hygiene Program</p>	<p>support community water fluoridation.</p> <p>5.3.b. Contact groups if testimony is needed.</p> <p>5.4.a. Continue to investigate ways to have the Washoe County District Health Department establish a program similar to the one being implemented by the Clark County Health District.</p>	<p>Program for compilation into a master list.</p> <p>5.3.c. Coalition Chair.</p> <p>5.4.a. Oral Health Program and Washoe County District Health Department.</p>	<p>variations in caries experience.</p> <p>5.4. Facilitate the sharing of existing protocols, forms, etc. with potential providers such as Nevada Health Centers, COW, and other community-</p>	<p>5.4. Coalition Coordinator.</p>

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<p>5.5. Promote the integratation of oral health education into existing education programs such as</p>	<p>fluoride varnish application.</p> <p>5.4.b. Investigate the possibility of establishing a fluoride varnish program at the Economic Opportunity Board (EOB) of Clark County Head Start program.</p> <p>5.4.c. Investigate the possibility of establishing a fluoride varnish program within the Washoe County District Health Department (WCDHD).</p> <p>5.5 Write a letter to the Fund for a Healthy Nevada suggesting that tobacco related</p>	<p>5.4.b. Coalition Coordinator, Oral Health Program Health Educator.</p> <p>5.4.c. Coalition Coordinator, Oral Health Program Health Educator, OHAC member from the WCDHD and the Clark County Health District (CCHD).</p> <p>5.5 Chair OHAC.</p>	<p>5.4. b. Contact the TMCC and WNCC nursing programs to</p> <p>5.5.a. Find out what, if any, oral health education is incorporated into the County Washoe County District Health</p>	<p>5.4.b. Laura Webb will send contact infor for TMCC to Oral Health program Health Educator. Diane Thorkeldson will send contact information for WNCC to Oral Health Program Health Educator.</p> <p>5.5.a. Chris Forsch will talk to Erin Dixon at he WCDHD.</p>	<p>based organizations</p> <p>5.5. Write a letter to the Fund for a Healthy Nevada suggesting that tobacco related grant applications</p>	<p>5.5.CCOH Chair</p>

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<p>tobacco and drug cessation programs, pre-natal education, and parenting classes.</p> <p>5.6. Reduce the morbidity and mortality from oral and pharyngeal cancer.</p>	<p>grant applications include bonus points for incorporating oral health education in the grant proposal.</p> <p>5.6. Establish a committee to prepare testimony in support of legislation discouraging the use of tobacco products.</p>	<p>5.6.a. OHAC Chair will appoint the Tobacco Subcommittee.</p> <p>5.6.b. The subcommittee will identify speakers, coordinate speaker presentations and notify them when their testimony is needed.</p> <p>5.6.c. The Coalition Coordinator will contact anti-</p>	<p>Department Tobacco Prevention Program.</p> <p>5.5.b. Contact the local hospitals to find out what oral health education is included in prenatal classes and how it is being provided.</p> <p>5.6. Identify ways to provide education about the inclusion of an oral cancer examination in a routine medical examination.</p>	<p>5.5.b. Saint Mary's – Mike Johnson. Washoe Med, Northern Nevada Medical Center – Oral Health program</p> <p>5.6. Medical school - High Sierra AHEC. HAWC – Dr. Markoff. Saint Mary's – partner with medical school, Oral Health Program?</p>	<p>must incorporate oral health education in the grant proposal.</p> <p>5.6. Investigate the feasibility of holding a community oral cancer awareness day during which free oral cancer screenings could be provided to community members.</p>	<p>5.6. Coalition Coordinator.</p>

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		tobacco advocacy groups and inform them of the availability of anti tobacco speakers who focus on the oral health effects of tobacco use.				
<p><b>Goal 6. To increase access to direct dental services.</b></p> <p>6.1. Eliminate barriers to provider participation in public health insurance programs.</p>	<p>6.1. a. Promote the establishment and expansion of a Dental Clinical Review Advisory Committee (CRAC) to the Medical Care Advisory Committee (MCAC) at the DHCFP.</p>	<p>6.1.a.1. The chair will send a letter to the Administrator requesting this be done. The letter will make a recommendation as to who should be appointed.</p> <p>6.1.a.2. The chair will send a subsequent letter providing the DHCFP with specific dates she</p>	<p>6.1.a.1. Write a letter of support for the reconvening and expansion of the Dental CRAC to the MCAC at the DHCFP.</p> <p>6.1.a. 2. Write a letter of support for expansion of the HMO panel in southern Nevada.</p> <p>6.1.a.3. Support recruitment of providers to Medicaid and Nevada Check-Up</p>	<p>6.1.a. Chair</p> <p>6.1.a.2. Chair</p> <p>6.1.3. The NNDS will contact First Health to find out if they are interested.</p>	<p>6.1. Address the acute problem (providers being paid) by participating in the bi-weekly telephone conference calls with First Health and Medicaid. Address the chronic problems of Medicaid policy and bureaucracy by supporting the reestablishment</p>	<p>6.1. Phone Calls – all CCOH members that are dental providers. Advisory Committee – Executive Committee. Article – CCOH Chair.</p>

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6.2. Promote and publicize successful programs that improve oral health to facilitate their replication.	<p>6.1.b. Request that the DHCFP send a representative to all OHAC meetings.</p> <p>6.2.a. Submit Best Practices proposals to ASTDD for the State Oral Health Plan, Surveillance System, Coalitions, and Saint Mary's integrated oral health care delivery system.</p> <p>6.2.b. Serve as a resource for</p>	<p>would like to see the Dental CRAC convened.</p> <p>The Chair will send a letter to the DHCFP.</p> <p>6.2.a. Oral Health Program.</p> <p>6.2.b. Mark Rosenberg, Tyree</p>	<p>by inviting First Health to provide a brief information session at a NNDS meeting discussing how they can provide training in the use of the new systems. Have someone who has mastered electronic billing (Saint Mary's?) speak as to how well it is working for them.</p> <p>6.2. Provide information needed for Best Practice submission.</p> <p>6.2. b. Serve as a resource for Regional</p>	<p>6.2. Saint Mary's</p> <p>6.2.b. All CUSP members.</p>	<p>of a Medicaid Advisory Committee (MCAC) dental subcommittee with CCOH representation. Write an article for the NDA Journal informing NDA members of efforts to address problems.</p> <p>6.2. Facilitate communication between successful programs with new or developing programs:</p> <p>NNDHP and 1DAY Miles for Smiles and Saint Mary's with rural communities interested in developing mobile dental</p>	<p>6.2. Coalition Coordinator.</p>

Goal and Objectives	How OHAC can support	Who in OHAC	How CUSP can support	Who in CUSP	How CCOH can support	Who in CCOH
<p>6.3. Create a stable source of funding for safety net providers.</p>	<p>Regional Oral Health Action Teams.</p> <p>6.3.a. Support the establishment of a fund to help pay for the cost of providing care to the uninsured (possibly funded</p>	<p>Davis, Betty Pate, Shari Peterson, Mike Johnson, Patty Craddock, Michael Sanders, Chris Forsch.</p> <p>6.3.a. Chair, coalitions.</p>	<p>Oral Health Action Teams.</p> <p>6.3. Not yet reviewed</p>		<p>restorative programs.</p> <p>Huntridge Teen Clinic and Children’s Dental Care International.</p> <p>Clark County Health District fluoride varnish program and Washoe County District Health Department.</p> <p>Washoe County School District Food Policy Committee with the Clark County School District.</p> <p>6.3. Utilize white paper on Access to Care and Infrastructure to educate policy makers and funders.</p>	<p>6.3. All CCOH members.</p>

<b>Goal and Objectives</b>	<b>How OHAC can support</b>	<b>Who in OHAC</b>	<b>How CUSP can support</b>	<b>Who in CUSP</b>	<b>How CCOH can support</b>	<b>Who in CCOH</b>
6.4. Establish new safety net sites.	by a tax on cosmetic surgery.				6.4. Continue to provide support as needed and appropriate to Reynaldo Martinez, the Children’s Dental Care International Paradise Clinic, Child Haven and the Pediatric Dental Residency Program clinic.	6.4. All CCOH members.
<b>Goal 7. Reduce barriers to care.</b>  7.1. Enhance patient access to care.	This goal has not yet been reviewed by the OHAC  7.1. Identify ways to provide continuing education on treating individuals with disabilities to oral health professionals		This goal has not yet been reviewed by CUSP.		7.1. Disseminate information about Robert Wood Johnson Foundation funding opportunities for home-based services.	7.1. Executive Committee.

Goal and Objectives	How OHAC can support	Who in OHAC	How CUSP can support	Who in CUSP	How CCOH can support	Who in CCOH
<p>7.2. Identify flexible alternative care delivery models.</p> <p>7.3. Identify consumer access issues.</p> <p>7.4. Provide culturally competent care.</p>					<p>7.2. Nothing identified</p> <p>7.3. Utilize the NNDHP, 1DAY and Give Kids a Smile to survey consumers on access issues. Utilize data collected to engage other community stakeholders to help address the identified issues.</p> <p>7.4. Make brochures in Spanish available to CCOH members. Investigate the possibility of partnering with the Dental Association and/or the local societies to provide a</p>	<p>7.2. -----</p> <p>7.3. N/A</p> <p>7.4. Brochures - State Oral Health Program. CE Course – Coalition Coordinator, UNLV School of Dental Medicine, NDA, SNDS.</p>

<b>Goal and Objectives</b>	<b>How OHAC can support</b>	<b>Who in OHAC</b>	<b>How CUSP can support</b>	<b>Who in CUSP</b>	<b>How CCOH can support</b>	<b>Who in CCOH</b>
					continuing education course on cultural competency.	